

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>JP</i>		10-01-01
O.I.P.E. CLASSIFIER		59	10291
FORMALITY REVIEW	<i>MM</i>	920	11-06-01
RESPONSE FORMALITY REVIEW	<i>Request</i>	925	01-16-02

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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921  
 11/26/01  
 85/11/16/02